## **Red Lion Recreation - Program Registration Form**

Participant's Name						
Last Name			First Name			
Parent/Legal Guardian (if under ag	e 18)					
Address						
Street		City		State	Zip	
Municipality - Red Lion Borough _	Other	·		_		
Email Address		Phor	ne ( ) -	( )	_	
		Home # Cell #				
Participant's Name	Birthdate	Gender	Program Nan	ne/Location	Fee	
				TOTAL	<b>5</b>	
				101711	Υ	
Emergency Contact		_ Phone (	)			
Please list allergies, medications or	dietary infor	mation:				
Waiver of Liability: I, injury or property damage again volunteers while a participant	inst Red Lio	n Recrea	tion, its agents, emp			
Signature of Participant (Or parent/guardian if under age 18)				Date	<u> </u>	
Registration forms can be <b>mailed</b> to:			Or dropped off at:			
Red Lion Recreation			Red Lion Community Building			
P. O. Box 158			190 S. Charles Street			
Red Lion, PA 17356  Feel free to			Red Lion, PA 17356  ouse the drop box if the doors are locked!			
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Cash, credit and checks accepted. Make checks payable to "Red Lion Recreation".

Call the Recreation Director at 717-244-6896 for more information.